

### INFORMATION ON TRAVELLERS TO AND FROM EBOLA VIRUS DISEASE HIGH RISK COUNTRIES

Name and Surname Of Traveler	Passport No.	ID No.	Occupation	Nationality	Country Of Departure	Address Of Residence In Departure Country	Flight Number	Airport Of Departure	Airport of Transit	Airport Of Destination	Date and Time Of Departure	Date and Time of arrival	Duration Stay in the Country of Arrival	Any Other Information The Department Should Know

**\*Completed Traveler Health Questionnaire should be attached to this form.**

The following information must also be provided when requesting permission to travel:

- South African telephone/cell phone number and South African residential address (if South Africa is the final destination)
- Details of next of kin (if South Africa is the final destination)
- Full motivation for the visit to South Africa